

2010 AAU GIRLS BASKETBALL



Tournament Information

Winning Ways Think Pink Tournament – Super Regional Tournament

DATES:	March 26 to 28 – This is a National Qualifying Tournament!
LOCATION:	Tampa, Florida – On the campus of University of Tampa
AGE DIVISIONS:	9u, 10u, 11u, 12u, 13u, 14u, 15u, 16u
TOURNAMENT DIRECTOR:	Tom Kane – 239-357-3020
ENTRY FEE:	Fee for Tournament is \$325.00 Entries will not be accepted until <u>money order or cashier's check</u> is received.
ENTRY DEADLINE:	All entries must be received 14 days prior to tournament date.
RULES OF PLAY:	All games will follow the AAU Girls' Basketball Handbook (NCAA).
PLAYER ROSTER:	Rosters must be submitted to the Host before playing first game.
AAU MEMBERSHIP:	All players must show their current AAU membership card
BIRTH CERTIFICATES:	All players must show their BIRTH CERTIFICATE to the designated person at the tournament.
UNIFORMS:	Teams must have white and dark jerseys.
AWARDS:	AAU medals will be awarded to first (1) and second (2) place teams.

- Please make sure you declare which **age** and **division** you are playing for on the roster and sign-in sheet.

SEND ENTRY FORM AND FEES TO:

WINNING WAYS BASKETBALL
8008 SIVON WAY
NAPLES, FLORIDA 34119

- You will not be entered into the tournament without a completed Entry Form and the proper entry fee.
- No Personal Checks.
- All Entry Forms and Checks For All Age Groups Must Be Received (not postmarked) 14 days prior to Tournament.
- Make Cashier's Check or Money Order Payable: Winning Ways Basketball of SWFLA, Inc.
- Official Hotel, Howard Johnson 111 West Fortune Street, Tampa - (813) 223-1351 - \$79 per night up to 4 people per room. Walk to Field House from hotel.



**INTENT TO PARTICIPATE
AAU GIRLS BASKETBALL
2010 Think Pink Tournament – National Qualifier
Tampa, Florida – University of Tampa**

Please fax this form to 239-963-9272 – Please check age group and division.

8U/3rd _____ 9U/4th _____ 10U/5th _____ 11U/6th _____ 12U/7th _____

13U/8th _____ 14U/9th _____ 15U/10th _____ 16U/11th _____

Division I _____ Division II _____

PLEASE PRINT VERY CLEARLY THE FOLLOWING:

TEAM NAME _____

COACH'S NAME _____

E MAIL ADDRESS _____

HOME PHONE # _____ CELL PHONE # _____

ADDRESS _____

ASST. COACH NAME _____

E MAIL ADDRESS _____

ASST. COACH HOME # _____ CELL PHONE # _____

TEAM PARENT NAME _____

E MAIL ADDRESS _____

TEAM PARENT PHONE # _____ CELL PHONE # _____

